



Birthday Child's Name: _____ Birthday Child's Age: _____

Contact Name: _____ Contact Date of Birth: _____ / _____ / _____
mm dd yyyy

Address: _____

City: _____ State: _____ Zip Code: _____

Phone (Home): _____ (Work): _____ (Cell): _____

Email Address: _____ # of Children Attending: _____

(Party Package includes 20 children. Add \$5 for each additional child.)

Theme Requested (Please check)

☐ General Birthday ☐ Princess ☐ Sports

Package (Please check)

☐ General Birthday ☐ Game Room Party ☐ Outdoor Playground Party

Date Requested: _____ Alternate Date: _____

Event Start and End Times: _____

Package includes 2 hours, plus ½ hour for clean-up.

(Building Hours: 8 AM-9 PM Monday-Saturday; 9 AM-6 PM Sunday)

PLEASE NOTE: This is just a request. A North Laurel Staff Member will get back to you within 2 business days after checking availability.

Return completed Birthday Package Request Forms to the North Laurel Community Center
(9411 Whiskey Bottom Road, Laurel, MD 20723) or fax to 240-568-3030.

Submission of this form confirms that applicant has read and understands the policies and procedures outlined in this Facility Rental Guide.

FOR OFFICE USE:

Date received: _____

Time received: _____

Initials: _____



NORTH LAUREL
COMMUNITY CENTER

9411 Whiskey Bottom Rd, Laurel, MD 20723